DEC 31 2007 W

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AMEDICANT TRANSMITTAL LETTER							Docket No. R2184.0499/P499	
Applicatio		Filing I		Examiner			Art Unit	
10/580,261-Co	onf. #3236	May 25,	2006	C. Prasad		2839		
plicant(s): Mas	sahiro Higashig		NTERCONN	ECTION	TERMINAL	A PRINTFI	D CIRCUI	
vention: ASSEN	ABLY AND ELE	CTRONIC AF	PPARATUS (a	as amend	ded)	, // 1 / MINTE	J 011(00)	
	тс	THE COMMI	SSIONER FO	D PATE	:NTS			
ransmitted here								
he fee has beer								
		CLAIM	S AS AMENI	DED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		tate			
Total Claims	33	- 24 =	9	X	50.00	\$45	0.00	
Independent Claims	10	- 6 =	4	х	200.00	\$80	00.00	
Multiple Depend	lant Claima (ab		L					
Other fee (pleas	e specify):							
(								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						\$125	0.00	
x Large Entity				s	mall Entity			
No additiona	al fee is require	d for this amer	ndment.					
=	ge Deposit Acc		İı	the am	ount of \$			
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<del></del>	ne amount of \$			the filing	fee is enclo	sed		
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	is hereby auth below.  A dup					04-107	13	
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	ny overpaymer							
x Charge a	any additional fili	ing or application	n processing t	ees requ	ired under 37	CFR 1.16 a	nd 1.17.	
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Gianni Minutoli	1	<del></del>		U	ated:De	ecember 31,	2001	
Attorney/Agent		198						
Ranga Souriraja		100	01/03/2	008 GFREY	1 00000012	10580261		
Attorney/Agent		109	01 FC:1			450.00 (	OP .	
DICKSTEIN SH 1825 Eye Stree			02 FC:1	614	40.00 DA	800.00		
Washington, D0 (202) 420-4742	20006-5403							